

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>12926</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>Ritchie M Brooks</u> P.O. Box, Bldg., Room No., if any Street <u>2001 Rhode Island Ave NE</u> City <u>WASH</u> State <u>DC</u> ZIP Code + 4 <u>20018</u>	4. Name, file number, and address of labor organization. Name <u>Teamsters Local 730</u> Labor Organization File Number <u>009 407</u> P.O. Box, Building and Room Number, if any Street <u>SAME</u> City <u>SAME</u> State <u>SAME</u> ZIP Code + 4
5. Position in labor organization.	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>[Signature]</u>	On <u>8-10-05</u> (202) <u>589-3434</u> Date Telephone Number

Name of Person Filing <b>Ritchie M. Brooks</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <b>Warehouseman Employees Local 730</b></p> <p>Trade Name, if any: <b>Teamsters Local 730</b></p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>2001 Rhode Island Ave N.E.</b></p> <p>City <b>Washington</b></p> <p>State <b>DC.</b> ZIP Code + 4 <b>20018</b></p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <b>LOCAL 730 Pension Fund</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>2001 Rhode Island Ave. N.E.</b></p> <p>City <b>Washington</b></p> <p>State <b>DC</b> ZIP Code + 4 <b>20018</b></p>	<p>11.a. Nature of such dealing.</p> <p><b>Pension Seminar</b> <b>W. H. H. H. S.C.</b> <b>April 28 - May 2</b></p>
	<p>11.b. Approximate dollar value of such dealing. <b>150 million</b></p>
	<p>12.a. Nature of interest held or income received.</p> <p><b>Food. Lodging. Plane tax.</b></p>
	<p>12.b. Amount. <b>1900.35</b></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

<p>10. If 9 b. or 9 c is checked give trust or employer's name</p> <p>Atlanta Capital</p>	<p>11.a Nature of such dealing.</p> <p>Pension Trust Fund</p>
<p>12.a Nature of interest held or income received.</p> <p>Golf + Dinner to discuss investment performance</p>	<p>11.b Approximate dollar value of such dealing.</p> <p>\$ 25 million</p> <p>12.b Amount</p> <p>3,054.15</p>

<p>10. If 9.b or 9.c is checked give trust or employer's name.</p> <p>Loomis Sayles</p>	<p>11.a Nature of such dealings.</p> <p>Pension Trust Fund</p>
<p>12.a Nature of interest held or income received.</p> <p><del>831.21</del> Golf + Dinner to discuss possible business with Company</p>	<p>11.b Approximate dollar value of such dealing.</p> <p>\$ 0</p> <p>12.b Amount</p> <p>831.21</p>

<p>10. If 9 b. or 9 c is checked give trust or employer's name</p> <p>Dickstein Shapiro Morin + Oshinsky</p>	<p>11.a Nature of such dealing.</p> <p>Re paid Legal Trust Fund</p>
<p>12.a Nature of interest held or income received.</p> <p>Mtg and dinner to discuss Fund with Fund lawyer</p>	<p>11.b Approximate dollar value of such dealing.</p> <p>\$ 20 million</p> <p>12.b Amount</p> <p>\$ 50 -</p>

<p>10. If 9.b or 9.c is checked give trust or employer's name.</p> <p>Invest Performance Services</p>	<p>11.a Nature of such dealings.</p> <p>Pension Fund</p>
<p>12.a Nature of interest held or income received.</p> <p>Mtg + dinner to discuss investments in fund</p>	<p>11.b Approximate dollar value of such dealing.</p> <p>\$ 125 million</p> <p>12.b Amount</p> <p>\$ 40 -</p>